

**Table 10: Examples of Situations for Infants That May Require Temporary or Permanent Strategies to Support or Enhance Breast Milk Production**

ILLNESSES	CONGENITAL CONDITION	BIRTH-RELATED COMPLICATIONS	OTHER
<ul style="list-style-type: none"> <li>■ Illness or surgery requiring hospitalization</li> <li>■ Hyperbilirubinemia</li> </ul>	<ul style="list-style-type: none"> <li>■ A clinical syndrome (e.g., Down syndrome) in which direct breastfeeding may pose additional challenges</li> <li>■ Anterior and posterior ankyloglossia</li> <li>■ Orofacial cleft</li> </ul>	<ul style="list-style-type: none"> <li>■ Transient complications, such as hypoglycemia, respiratory or cardiac distress, or neonatal abstinence syndrome</li> <li>■ Prematurity</li> <li>■ Vaginal operative delivery with forceps or vacuum</li> <li>■ Twins or higher order multiples</li> </ul>	<ul style="list-style-type: none"> <li>■ Concerns about insufficient weight gain and/or failure to thrive</li> </ul>

Sources: Flint A, New K, Davies MW. Cup feeding versus other forms of supplemental enteral feeding for newborn infants unable to fully breastfeed. *Cochrane Database Syst Rev.* 2016;8:CD005092; Whitford HM, Wallis SK, Dowswell T, et al. Breastfeeding education and support for women with twins or higher order multiples. *Cochrane Database Syst Rev.* 2017;2:CD012003; Academy of Breastfeeding Medicine Protocol Committee. ABM clinical protocol #9: use of Galactagogues in initiating or augmenting the rate of maternal milk secretion. *Breastfeed Med.* 2011 Feb;6(1):41–9; Jaafar HS, Ho JJ, Lee SK. Rooming-in for new mother and infant versus separate care for increasing the duration of breastfeeding. *Cochrane Database Syst Rev.* 2016;8:CD006641; and Moran VH, Morgan H, Rothnie K, et al. Incentives to promote breastfeeding: a systematic review. *Pediatrics.* 2015;135(3):e687–e702.

Regardless of the strategy chosen to support or enhance breast milk supply, steps such as initiating skin-to-skin contact, observing a breastfeeding session, providing education, and reducing or stopping the use of formula supplementation should first be introduced (46). In cases where further interventions are indicated, individualized approaches should be used that consider variables such as (a) whether breast milk supply has been initiated or established and (b) the preferences and short- and long-term breastfeeding goals of the breastfeeding person (39).

Strategies to support breast milk expression include hand expression (as discussed in **Recommendation 2.5**), pumping, or possibly Galactagogues (33, 39, 66). The use of these strategies may maintain or increase breast milk supply in cases where it might otherwise not be possible. Regardless of the strategy used, careful monitoring and follow-up are indicated (46).

### Pumping

Pumping can be used to support or enhance breast milk supply (39). Types of breast pumps include manual or electric; they are available as either a single or double model. There is insufficient evidence to support a specific type of breast pump for the initiation or maintenance of breast milk supply: manual pumps or lower cost pumps may be as effective as electric or hospital-grade ones (39). More studies are needed to determine the type of pump, timing, and frequency of pumping to most effectively support breast milk production (66).